BEST AVAILABLE COPY

									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									09738095					
CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER		
r=-			(Column 1)		(Column 2)			TYPE				SMALL	SMALL ENTITY	
TOTAL CLAIMS								RATI	Ē	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		•			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			> minus 3 =		•			X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=			OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			OR	TOTAL	7/0	
CLAIMS AS AMENDED - PART II									1			OTHER		
(Column 1) (Column 2) (Column 3)							3)	SMAI	LL E	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	7	RATI	Ш	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.18	Minus	<u>.</u>	0	= >		X\$ 9	=		OR	X\$18=		
AME	Independent	. 3	Minus	***	<u> </u>	<u> </u>	_	X40-	=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135				+270=		
	·							TO			OR	TOTAL		
	·							ADDIT. F	EE		OR	ADDIT. FEE		
_		(Column 1) CLAIMS		(Colui		(Column	3)	·	_					
AMENDMENT B		REMAINING AFTER AMENDMENT			IBER OUSLY	PRESEN EXTRA	7	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9	=		OR	X\$18=		
	Independent	•	Minus	***		<u> -</u>	_	X40=			OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM			+135		-	OR	+270=		
									AL EE		OR	TOTAL ADDIT, FEE		
		3)				-								
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	7 1	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• .	Minus	**		=	_	X\$ 9:	-		OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	CL ASA	-	- I	X40=			OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									_		OB	+270=		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

TOTAL

TOTAL

ADDIT. FEE